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28319 75	90 06/29/2006			nave its own certificat	e of mailing or transmission.	
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APPLICATION NO.	FILING DATE	FIRST N	AMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/700,178	700,178 11/03/2003 Cristing		ristina Manu	***************************************	03797.00622	3590
FITLE OF INVENTION: FI	LEXIBLE VARIABLE ANI	EXECUTION MATRIX				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE	PU	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300		\$1700	09/29/2006
EXAMINER		ART UNIT	CI	.ASS-SUBCLASS		
TSAI, CAROL S W		2857	2857 702-181000			
CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicat	e address or indication of "Forence address (or Change of 22) attached.  ion (or "Fee Address" Indicate more recent) attached.	Correspondence (1) the or ag (2) the tion form register 2 register.	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
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